

## STATEMENT OF INTERESTS

INSTRUCTIONS: This form must be used to report all interests required to be disclosed under the Conflict of Interest Disclosure Act (T.C.A. §8-50-501, et.seg.) Disclosure statements must be filed annually by January 31 by officeholders, no later than thirty (30) days following the qualifying deadline for candidates and within thirty (30) days from the date of appointment for appointees. Amended disclosure must be filed whenever reported conditions change because of the termination or acquisition of interests for which disclosure is required.

Individuals holding or seeking state offices specified in T.C.A. §8-50-501 must file their disclosure statements with the Registry of Election Finance, 404 James Robertson Parkway, Suite 1614, Nashville, TN 37243-1360 (phone 615-741-7959). Individuals holding or seeking elected city or county office must file their reports with the county election commission.

Officeholders may complete items 1- 4 and skip to item 14 if there has been no change in condition since the previous report. The disclosure statement must be signed and the signature attested to by a witness in item 15. Attach additional pages as necessary. Please type or print all information in black ink.

1. DATE OF DISCLOSURE	2. NAME OF OFFICIAL OR CANDIDATE
1/25/05	Leslie M. Dewell
3. ADDRESS AND PHONE	Street or Rural Route City State Zip code Phone
	( )
4 TITUE OF OFFICE HELD OR	SOUGHT (Include district number, if applicable)  WER- (FIL) of Sodds DAISS
minor children residing with you.	st major sources of your private income of more than \$1,000 and that of your spouse o "Major sources of private income" includes, but is not limited to, offices, directorships and
Sause -	Social Security
porte	sicini Cecani
-	
7	stment by you, your spouse or minor children residing with you in any corporation or other
corporation or organization must	be listed but no dollar amounts or percentages of the investment need to be stated.
spouse or minor children residing	, firm or organization for whom compensated lobbying is done by any associate, your with you. Also, list any firm in which you, your spouse or minor children residing with you ensated lobbying is done. Explain the terms of any such employment and the measures
	List in general terms (by areas of the client's interests) the entities to which professional profession

LEGISLATIVE EXPENSES (For members of General Assembly only): List the amount and source (by name) of any contributions from private sources for use in defraying the expenses necessarily related to the adequate performance of your legislative duties.		
8163		
promoting or opposing, influencing or attempting	u receive from any person, firm or organization who is in the practice of ig to influence directly or indirectly, the passage or defeat of any legisla- he legislative committees or the members thereof.	
11. BANKRUPTCY: List any adjudication of batter (5) years of the date of this report.	ankruptcy or discharge received in any United States district court within	
made in the previous calendar year to you, you closed on this report if they are:  (1) From your immediate family (spouse, paid)  (2) From a federally insured financial institution business of making loans. The loan must assures repayment, evidenced by a writte (3) Secured by a recorded security interest in made on a basis which assures repayment amortization schedule.  (4) From a partnership in which you have at	ion or made in accordance with existing law in the ordinary course of doing st bear the usual and customary rate of interest, be made on a basis which en instrument and subject to a due date or amortization schedule. In collateral, bearing the usual and customary interest rate of the lender and ment, evidenced by a written instrument and subject to a due date and least ten percent (10%) partnership interest.	
13. ADDITIONAL INFORMATION: List any ad	ditional information you wish to disclose.	
14. OPTION AVAILABLE TO OFFICEHOLDER  There has been no change in condi		
	AL OR CANDIDATE (must be attested to by witness)	
Construction of the Manager of the M	I certify that the information contained in this disclosure statement is true and that it is a complete and accurate report of all matters that I am required to disclose by the Conflict of Interest Disclosure Act  Signature of Official or Candidate  I, the undersigned, do hereby without the above signature which was signed in my presence.	

Registry of Election Finance SS-3044 (Rev. 06/03) RDA 1741